

**AMENDMENTS TO THE CLAIMS:**

1. – 44. (Canceled)

45. (New) A method of treating a T-cell malignancy comprising administering to a human in need thereof an effective amount of MEDI-507 or an antigen-binding fragment thereof, wherein the T-cell malignancy comprises cells that express CD2 and the T-cell malignancy is not a cutaneous T-cell lymphoma.

46. (New) A method of treating a T-cell malignancy comprising administering to a human in need thereof an effective amount of an antibody that immunospecifically binds to human CD2 with the proviso that the antibody is not MEDI-507 or an antigen-binding fragment thereof, wherein the T-cell malignancy comprises cells that express CD2 and the T-cell malignancy is not a cutaneous T-cell lymphoma.

47. (New) A method of treating a T-cell malignancy refractory or non-responsive to chemotherapy, comprising administering to a human in need thereof an effective amount of MEDI-507 or an antigen-binding fragment thereof, wherein the T-cell malignancy comprises cells that express CD2 and the T-cell malignancy is not a cutaneous T-cell lymphoma.

48. (New) A method of treating a T-cell malignancy refractory or non-responsive to chemotherapy, comprising administering to a human in need thereof an effective amount of an antibody that immunospecifically binds to human CD2 with the proviso that the antibody is not MEDI-507 or an antigen-binding fragment thereof, wherein the T-cell malignancy comprises cells that express CD2 and the T-cell malignancy is not a cutaneous T-cell lymphoma.

49. (New) The method of claim 46 or 48, wherein the antibody competes with MEDI-507 for binding to human CD2.

50. (New) The method of claim 49, wherein the antibody binds to an epitope comprising amino acid residue 18, 55 or 59 of human CD2.

51. (New) The method of claim 45 further comprising administering to the human an effective amount of a therapy other than MEDI-507 or an antigen-binding fragment thereof.

52. (New) The method of claim 46 further comprising administering to the human an effective amount of a therapy other than the antibody.

53. (New) The method of claim 51, wherein the therapy is chemotherapy.

54. (New) The method of claim 52, wherein the therapy is chemotherapy.

55. (New) The method of claim 53, wherein the chemotherapy is aggressive combination chemotherapy.

56. (New) The method of claim 54, wherein the chemotherapy is aggressive combination chemotherapy.

57. (New) The method of claim 53, wherein the chemotherapy comprises doxorubicin, epirubicin, cyclophosphamide, 5-fluorouracil, docetaxel, paclitaxel, leucovorin, levamisole, irinotecan, estramustine, etoposide, vinblastine, dacarbazine, carmustine, lomustine, a vinca alkaloid, cisplatin, mitomycin, vinorelbine, gemcitabine, carboplatin, hexamethylmelamine or topotecan.

58. (New) The method of claim 54, wherein the chemotherapy comprises doxorubicin, epirubicin, cyclophosphamide, 5-fluorouracil, docetaxel, paclitaxel, leucovorin, levamisole, irinotecan, estramustine, etoposide, vinblastine, dacarbazine, carmustine, lomustine, a vinca alkaloid, cisplatin, mitomycin, vinorelbine, gemcitabine, carboplatin, hexamethylmelamine or topotecan.

59. (New) The method of claim 47 further comprising administering to the human an effective amount of a therapy other than MEDI-507.

60. (New) The method of claim 48 further comprising administering to the human an effective amount of a therapy other than an antibody that competes with MEDI-507 for binding to human CD2.

61. (New) The method of claim 45 or 47, wherein MEDI-507 or an antigen-binding fragment thereof is conjugated to a therapeutic moiety.
62. (New) The method of claim 46 or 48, wherein the antibody is conjugated to a therapeutic moiety.
63. (New) The method of claim 61, wherein the therapeutic moiety is cytotoxic agent or radioactive element.
64. (New) The method of claim 61, wherein the therapeutic moiety is an antimetabolite, an alkylating agent, an anthracycline, an antibiotic, an auristatin, a DNA-repair enzyme inhibitor, a farnesyl transferase inhibitor, or a topoisomerase inhibitor.
65. (New) The method of claim 64, wherein the auristatin is auristatin PHE.
66. (New) The method of claim 45 or 47, wherein the administration of MEDI-507 or an antigen-binding fragment thereof prolongs the survival of the human.
67. (New) The method of claim 51 or 52, wherein the survival of the human is prolonged.
68. (New) The method of claim 45 or 51, wherein the human has not previously been treated for the T-cell malignancy.
69. (New) The method of claim 46 or 52, wherein the human has not previously been treated for the T-cell malignancy.
70. (New) The method of claim 53 or 54, wherein the survival of the human is prolonged.
71. (New) The method of claim 45 or 47, wherein MEDI-507 or an antigen-binding fragment thereof is administered parenterally.
72. (New) The method of claim 45 or 47, wherein MEDI-507 or an antigen-binding fragment thereof is administered intravenously.

73. (New) The method of claim 46 or 48, wherein the antibody is administered parenterally.

74. (New) The method of claim 46 or 48, wherein the antibody is administered intravenously.

75. (New) The method of claim 45 or 47, wherein MEDI-507 or an antigen-binding fragment thereof is administered weekly.

76. (New) The method of claim 45 or 47, wherein MEDI-507 or an antigen-binding fragment thereof is administered to the human at a dose of 0.01 mg/kg to 10 mg/kg.

77. (New) The method of claim 45 or 47, wherein the effective amount is a dose of 0.1 mg/kg/week to 10 mg/kg/week for 6 weeks, 8 weeks, 12 weeks, 6 months, 8 months, 10 months or 12 months.

78. (New) The method of claim 45, 46, 47, 48, 51, 52, 53 or 54, wherein the T-cell malignancy is a peripheral T-cell lymphoma.

79. (New) The method of claim 45, 46, 47 or 48, wherein the T-cell malignancy is adult T-cell leukemia.

80. (New) The method of claim 45, 46, 47 or 48, wherein the T-cell malignancy is large granular lymphocyte leukemia.

81. (New) The method of claim 45, 46, 47 or 48, wherein the T-cell malignancy is angioimmunoblastic T-cell lymphoma, intestinal T-cell lymphoma, anaplastic large cell lymphoma, nasal and nasal type NK/T cell lymphoma, peripheral T-cell lymphoma unspecified, or hepatosplenic gamma/delta T-cell lymphoma.

82. (New) The method of claim 46 or 48, wherein the antibody is not LO-CD2a.